# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION 177 26

For Office Use Only (Revised 7-1-15) Zoning Official Building Official M 10/20 By 10/20 Permit # 35949
Flood Zone X Development Permit Zoning A:3 Land Use Plan Map Category A
Comments
FEMA Map# Elevation Finished Floor Labous River In Floodway
□ Recorded Deed or Property Appraiser PO I Site Plan (FEH# 17=0669- □ Well letter OR
Existing well   Land Owner Affidavit   Installer Authorization   FW Comp. letter App Fee Paid
□ DOT Approval □ Parent Parcel # □ STUP-MH □ STUP-MH
□ Ellisville Water Sys 🖟 Assessment Paid on Property □ Out County □ In County ☑ Sub VF Form
Property ID # 10-3S-16-02058-034 Subdivision Parnell Hills S/D Blk F Unit 2 Lot# 1
New Mobile Home X Used Mobile Home MH Size 28x48 Year 2018
■ Applicant [ KIM KOON Phone # 386-497-2311
<ul> <li>Address 546 SW Dortch Street, Fort White, FL, 32038</li> </ul>
Name of Property Owner Tommie Reed Phone# 386-365-0115
911 Address 130 NW JAN CT, LAW CTC +L32055
■ Circle the correct power company - FL Power & Light - (Clay Electric)
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home
Address 130 NW Jan Court, Lake City, FL, 32056
_
Current Number of Dwellings on Property 1
Lot Size 280 x 186 irregular Total Acreage 1.18
Do you : Have Existing Drive or need Culvert Permit (Rutting in a Culvert) or Culvert Waiver (Circle one (Not existing but do not need a Culvert)    Course   Course   Culvert   Circle one (Not existing but do not need a Culvert)
■ Is this Mobile Home Replacing an Existing Mobile Home Yes
<ul> <li>Driving Directions to the Property 41 North, TL Moore Road, TR Jan Court, 1st lot on left</li> </ul>
Name of Licensed Dealer/Installer Rusty Knowles Phone # 386-397-0886
Installers Address 5801 SW ST HWV 47, Lake City, FL, 32024
■ License Number IH-1038219 Installation Decal # 46069
Ja Sort [mil 10,27.17 \$ 375.00
MS REED CIME IN to inquire about her APP 11.1.17
and wor the 11.1.

911 Address where home is being installed. installer These worksheets must be completed and signed by the installer. Submit the originals with the packet. Typical pier spacing Manufacturer MOTH I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. if home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) 2 sterriage wat, piers within 2 of and of horse Length x width Installer's initials License # COLUMBIA COUNTY PERMIT WORKSHEET H1032219 18836 18: 19 to 150 capacity bearing Manufacturer Oliver Technologies Longitudinal Stabilizing Device (LSD)
Nerufacturer
Longitudinal Stabilizing Device w/ Lateral Arms and their pier pad sizes below. List all marriage wall openings greater than 4 foot Other pier pad sizes (required by the mfg.) Perimeter pier pad sizze 3500 nsf interpolated Ped f-beam pier pad size Double wide Single wide Home is installed in accordance with Rule 15-C Triple/Quad Home installed to the Manufacturer's Installation Manual **New Home** 3000 pst 1500 psf 2000 psf 2500 psf 1000 Def Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (E. DE) Footer 327 from Rule 15C-1 pier spacing table. THE DOWN COMPONENTS PIER PAID SIZES 16"×16" PIER SPACING TABLE FOR USED HOMES Z Q O2 07 7 6 1-24xx 320x20 Wind Zone II **Used Home** Serial # Installation Decal# 18 1/2" × 18 Pier pad size 177 (342) 16816 CA 5x25.5 10H6A 217325 20° x 20° Z (400) Wind Zone III Longitudinal
Marriage wall
Shearwall 22 × 22 (484)° within 2' of end of home spaced at 5' 4" oc 48 Sidewall 17 3/16 x 25 3/16 17 1/2 x 25 1/2 24 x 24 26 x 26 POPULAR PAD SIZES 엑엑 엑엑 13 1/4 × 26 1/4 20 × 20 OTHER TIES 16 x 16 16 x 18 18.5 x 18.5 16 x 22.5 Pad Size FRAME TIES 24" X 24" 75t ANCHORS (576) page 1 of 2 엑엑 ପ୍ରପ୍ରପ  $\square$ 26" × 26" (676) 676 88 台 374 380 288

9

# **COLUMBIA COUNTY PERMIT WORKSHEET**

page 2 of 2

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 1521	Connect all sower drains to an existing sewer tap or septic tank. Pg. 1541	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. $+5/2$ .	Electrical		10-10-17	Installer Name Rock   R	reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.    Compared to the mobile home manufacturer may require anchors with 4000 lb holding capacity.	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the forcus heat	TORQUE PROBE TEST  The results of the torque probe test is $NA \nu \gamma inch$ pounds or check here if you are declaring 5 anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.		x x x	3. Using 500 lb. increments, take the lowest	1. Test the perimeter of the home at 6 locations.  2. Take the reading at the depth of the footer.	X X X X	The packet penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing.	POCKET PENETROHETER TEST
Installer Signature Date 10.2	is accurate and true based on the	Installer verifies all information given with this permit workshe			1	Dryer vent installed outside of skinting. Yes N/A Range downflow vent installed of skinting. Yes N/A	-	The bottomboard will be repaired and/or taped. Yes Pg Pg Fiding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Weatherproofing	Type gasket 64 0%/ 4 Installed:  Between Floors Yes  Between Walls Yes  Bottom of ridgebearn Yes	Installed's initials RIX	I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and bucked marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	Gasilyt (weatherproding inquirement)	Type Fastener. 54.74.25 Length: 34.4 Spacing. For used homes a min. 30 gauge, 8" wide, galvanized will be centered over the peak of the roof and fastened roofing nails at 2" on center on both sides of the center.	Floor: Type Fastener: 4445 Length: 6" Spacing: 40"	Debris and organic material removed  Water drainage: Natural Swale Pad Other	Site Properation

Signature verifies all information given with this permit worksheet is accurate and true based on the Date 10:2017

9

Yes

3-BEDROOM / 2-BATH

WATER CROSSOVER (IF ANY) (G) DUCT LAWLE.

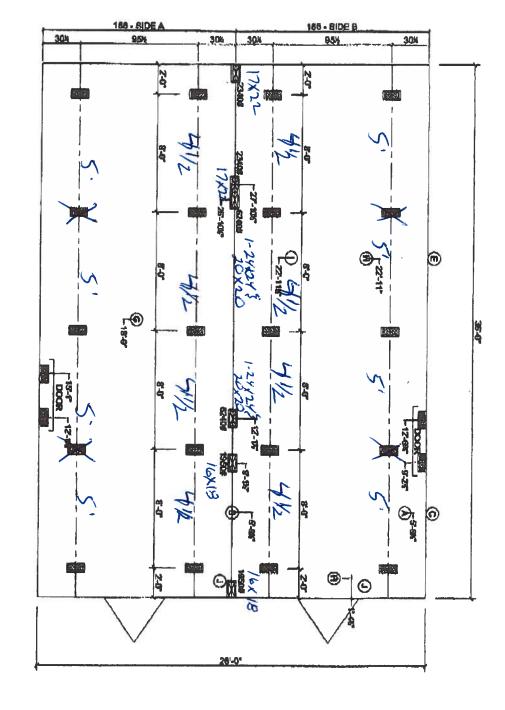
(H) SENVER DROPS
(I) REPURN AR (MOOPT, HEAT PUMP ON DUCT)
ANT) (J) SUSPLY AR (MICHT, HEAT PUMP ON DUCT)

L-2363
(C)

**MODEL: L-2363C** · THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION NAVIAL AND IT'S SUPPLEMENTS. - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC. - FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION NAVIULAL FOR REQUIREMENTS. ive Oak Homes (A) MAIN BLECTRICAL
(B) BLECTRICAL CROSSOVER
(C) WAITER PALET
(D) WAITER CROSSOVER (IF ANY)
(E) BAS BALET (IF ANY)
(F) GAS CROSSOVER (IF ANY)

POUNDATION NOTES: MARIAGE LINE OPENING SUPPORT PIER/TYP, TIEDOWN LOCATIONS (FOR CONCRETE SLAB SET) M HBEAM SUPPORT PERMYP

2-22-2016



District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips District No. 5 - Tim Murphy



#### BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

# **Address Assignment and Maintenance Document**

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:

10/30/2017 3:15:56 PM

Address:

130 NW JAN Ct

City:

LAKE CITY

State:

FL

Zip Code

32055

Pracel ID

02058-034

REMARKS: Address Verification.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED. THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

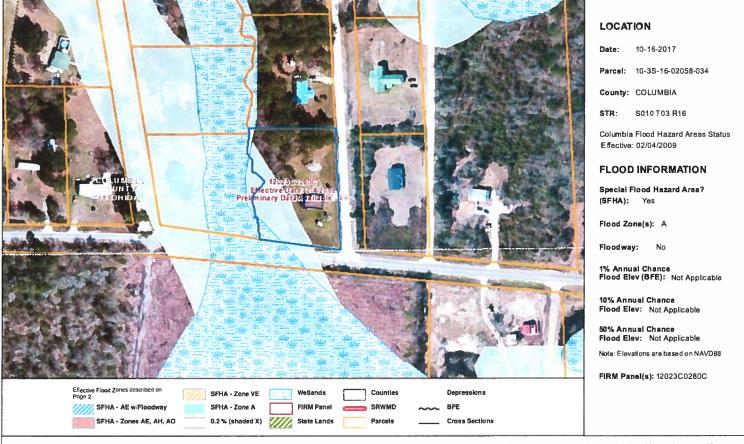
# STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application	Number
PART II - SITEPLAN	
157:/5	10
Scale: 1 inch = 40 feet.	DEAINNER FINEROMENT
Scale. Tillet - 40 feet.	ENEXMEN
C M	
MATURATE (3)	. 3
Manary 1	9
Scale: 1 inch = 40 feet.  WATCH ARTY  OPAN ARYA  No.	2
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	( <del>3</del> )
35.1	
WKS.	3
105	
105 105 45	
123 32 37 DENVIZ	280'00
STERE !	
1 X/Asi no	
7' 186.02 NOW MOR	ORK RENAD
186.02	D
	746
Bloken	
Notes:	
	3
- Camera Camera	
Site Plan submitted by:	MASTER CONTRACTOR
Plan Approved Not Approved	Date
By	County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

#### Suwannee River Water Management District Effective Flood Information Report



The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available online (http://www.srw.mdfloodreport.com). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (http://www.msc.fema.gov) for information on available products associated with this FIRM panel. Available products from the Map Service Center may include previously issued Letters of Map Change.

Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps.





# COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION 1 1 12/

	(license holder name), Ilcensed qualifier
for Country ELECTRIC	LLC (company name), do certify that
the below referenced person(s) listed on this form holder, or la/era employed by me directly or throu officer of the corporation; or, pertner as defined in person(s) la/era under my direct supervision and sign permits; call for inspections and sign subcor-	in is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in Florida Statutos Chapter 468, and the said control and la/are authorized to purchase and intractor verification forms on my behalf.
Printed Name of Person Authorized	Signature of Authorized Person
1 DA/13 BURD	1.
2. Rosh Foxel	2 Roch D7
3. Leo JACKSON JA	3 July hofy
4.	4.
5.	5.
authority to discipline a ilcense holder for violatic officers, or employees and that I have full responsed ordinances inherent in the privilege granted if at any time the person(a) you have sutherized officer(s), you must notify this department in write authorized of orm, which will supersede all new unsutherized persons to use your name and/or i	by Issuance of such permits.  Island to longer agents, employee(a), or ind of the chances and submit a new letter of lous lists. Failure to do so may allow longer number to obtain permits.
(Notarized)	License Number Date
NOTARY INFORMATION COUNTY OF	Colimbia
The above iloense holder, whose name is	me or has produced identification this de day of me! 20/6.  (Seal/Stamp)
WORKER A TALES MANAY PROME - BOARD A POSTOR BOARDE W & GONDON AN EASTOR BY COMME - BRANCH AN EASTOR	

ZU1/ Iax Year updated: 10/12/2017 Parcel: 10-3S-16-02058-034 **Owner & Property Info** Search Result: 1 of 1 Owner's Name REED TOMMIE A & LORETTA P O BOX 902 **Mailing Address** LAKE CITY, FL 32056-0902 Site Address 130 NW JAN CT Use Desc. (code) MOBILE HOM (000200) **Tax District** 3 (County) Neighborhood 10316 **Land Area Market Area** 1.180 ACRES NOTE: This description is not to be used as the Legal Description Description for this parcel in any legal transaction. LOT 1 BLOCK F PARNELL HILLS UNIT 2. ORB 963-222. **Property & Assessment Values** 2017 Certified Values 2018 Working Values (...Hide Values) \$9,799.00 \$9,799.00 Mkt Land Value cnt: (0) Mkt Land Value cnt: (0) Ag Land Value Ag Land Value cnt: (2) \$0.00 cnt: (2) \$0.00 **Building Value** cnt: (1) \$7,197.00 **Building Value** cnt: (1) \$7,197.00 \$1,300.00 XFOB Value cnt; (2) XFOB Value cnt: (2) \$1,300.00 \$18,296.00 Total Appraised Value Total Appraised Value \$18,296.00 Just Value \$18,296.00 Just Value \$18,296.00 Class Value \$0.00 Class Value \$0.00 Assessed Value \$18,296.00 Assessed Value \$18,296.00 (code: HX H3) (code: HX H3) Exempt Value \$18,296.00 Exempt Value \$18,296.00 Cnty: \$0 Cnty: \$0 Total Taxable Value Total Taxable Value Other: \$0 | Schl: \$0 Other: \$0 | Schl: \$0 NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER17/0 -65	CONTRACTOR Rusty Knowles	PHONL 386-397-0886						
	THIS FORM MUST E	BE SUBMITTED PRIOR TO THE ISSUANCE OF A	A PERMIT						
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.									
	•	onsible for the corrected form being rk. Violations will result in stop work 							
ELECTRICAL	Print Name Leo Jackson / C	Country Electric Signature	35						
15/2	License #: ES 12001176	Phone #: 38	6-294-2993						
1503	Qu	failler Form Attached							
MECHANICAL/	Print Name Tommie Reed	Signature	arete Rush						
A/C	License #: Owner	Phone #:386	3-365-0115						
	Qu	alifier Form Attached	Dale Richard Burd						
Qualifier Forms cannot be submitted for any Specialty License.  NOTARY PUBLIC  STATE OF FLORIDA  Som # FF 133205  Propres 7/16/2018									
Specialty Li	cense License Number	Sub-Contractors Printed Name	Sub-Contractors Signature						
MASON CONCRETE FIN	IICHED								
CONCRETE PIN	IIJIIEN		<u> </u>						

**F. S. 440.103 Building permits; identification of minimum premium policy.**—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

# Columbia County Tax Collector

generated on 10/20/2017 1:01:22 PM EDT

# Tax Record

Last Update: 10/20/2017 1:01:21 PM EDT

Register for eBill

## Ad Valorem Taxes and Non-Ad Valorem Assessments

The information contained herein does not constitute a title search and should not be relied on as such

<b>Account Number</b>		Tax Ty	Тах	Tax Year 2016		
R02058-034		REAL ES	20			
Mailing Address		Property	/ Address			
REED TOMMIE A & LORETTA			NW LAKE CI'	TY		
P O BOX 902	-					
LAKE CITY FL 32056-0902		GEO Numb				
			02058-034			
		100010				
Exempt Amount		Taxable	Value			
See Below		See Be	elow			
Exemption Detail	Milla	age Code	E	scrow Code	<b>.</b>	
HX 18140	003					
Legal Description (clic	k for full	l description	on)			
10-35-16 0200/0200 1.18	Acres LO	r 1 block f	PARNELL HI	LLS UNIT 2	2. ORB	
963-222.	. 1101 00 100				• • • • • • • • • • • • • • • • • • • •	
300 222.						
	Ad Val	orem Taxes				
axing Authority	Rate	Assessed	Exemption	Taxable	Taxes	
axing Additionity	Rate	Value	Amount	Value	Levied	
DARD OF COUNTY COMMISSIONERS	8,0150	<b>Value</b> 18,140	Amount 18,140	<b>Value</b> ۶0		
DARD OF COUNTY COMMISSIONERS	8,0150	18,140	18,140	\$0	\$0 <sub>*</sub> 00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY	8.0150	18,140 18,140	18,140 18,140	\$0 \$0	\$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL	8.0150 0.7480 4.5040	18,140 18,140 18,140	18,140 18,140 18,140	\$0 \$0 \$0	\$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY	8,0150 0.7480 4,5040 1.5000	18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST	8,0150 0.7480 4,5040 1,5000 0,4093	18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST	8,0150 0.7480 4,5040 1.5000	18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0	\$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST	8,0150 0.7480 4,5040 1,5000 0,4093	18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage	8,0150 0.7480 4.5040 1.5000 0.4093 0.9620	18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS CLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY COAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author	8,0150 0,7480 4,5040 1,5000 0,4093 0,9620 16.138 on-Ad Valo	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY OCAL APITAL OUTLAY UWANNEE RIVER MATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage	8,0150 0,7480 4,5040 1,5000 0,4093 0,9620 16.138 on-Ad Valo	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY DCAL APITAL OUTLAY JWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ESCRETIONARY DEAL APITAL OUTLAY JWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 <b>Amount</b> \$183.32	
DARD OF COUNTY COMMISSIONERS DLUMBIA COUNTY SCHOOL BOARD ESCRETIONARY DOCAL APITAL OUTLAY JWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 <b>Amount</b> \$183.32	
DARD OF COUNTY COMMISSIONERS CLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY COAL APITAL OUTLAY UWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
OARD OF COUNTY COMMISSIONERS OLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY OCAL APITAL OUTLAY UWANNEE RIVER MATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Authority  FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140	18,140 18,140 18,140 18,140 18,140 18,140  tal Taxes  ments	\$0 \$0 \$0 \$0 \$0	\$0,00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 <b>Amount</b> \$183.32 \$193.00	
OARD OF COUNTY COMMISSIONERS OLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY OCAL APITAL OUTLAY UWANNEE RIVER MATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Authority  FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140 Total	18,140 18,140 18,140 18,140 18,140 18,140 18,140	\$0 \$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
OARD OF COUNTY COMMISSIONERS OLUMBIA COUNTY SCHOOL BOARD ISCRETIONARY OCAL APITAL OUTLAY UWANNEE RIVER MATER MGT DIST AKE SHORE HOSPITAL AUTHORITY  Total Millage  No Code Levying Author FFIR FIRE ASSESSME	8.0150 0.7480 4.5040 1.5000 0.4093 0.9620 16.138 Dn-Ad Valouty	18,140 18,140 18,140 18,140 18,140 18,140 Total	18,140  18,140  18,140  18,140  18,140  18,140  18,140  Assessment  Assessment	\$0 \$0 \$0 \$0 \$0 \$0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 <b>Amount</b> \$183.32 \$193.00	

# STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONST	RUCTION PERMIT
Permit Application	Number 17-0669
PART II - SITEPLAN - 157.75	
Scale: 1 inch = 40 feet.	DEAININGTE FIRSKOMENT
MATURIAN ASI	S. S
William I will have been a second of the sec	RE
WK 5. 1 50'	3
123' 3ED 11 45	280'00
Szeri 83	
3	
1 186.02 Nov mo	Dehnerry
Notes:	
Site Plan submitted by:	MASTER CONTRACTOR
Plan Approved Not Approved	Date IIIII>
By Celusing	County Health Department
AL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH	I DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)



# STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

[ ]	CATION New Sy Repair	ystem	[X]	Existing Sys Abandonment	tem [	]	Holding Tank	1 <sup>2</sup>		Innovative
APPLI	CANT:	Tommie R	teed							
AGENT	: ROCKY	FORD, A	& B C	DNSTRUCTION			TI	ELEPI	HONE:	386-497-2311
MAILI	NG ADDI	RESS: <u>546</u>	SW Do	rtch Street,	FT. WHITE,	FL,	32038			
BY A APPLI	PERSON CANT'S	LICENSED RESPONSI	PURSUZ BILITY		5(3)(m) OR OCUMENTATIO	489 N O	.552, FLORIDA F THE DATE TH	A STA	ATUTE:	
PROPE	RTY IN	FORMATION								
LOT:	1	BLOCK:	F	SUB: Parne	ll Hills	U	nit 2		P	LATTED: 1976
PROPE	RTY ID	#: <u>10-38</u>	i-16-0	2058-034	ZONIN	G: _	I/M (	OR E	QUIVA	ALENT: [Y/N]
PROPE	RTY SI	ZE: <u>1.18</u>	ACRE	WATER SUPP	LY: 🍋 PR	IVA	TE PUBLIC [	]<=	=20000	GPD [ ]>2000GPD
IS SE	WER AV	AILABLE A	S PER :	381.0065, FS?	[ Y /N)		DIST	ANCE	TO S	SEWER:FT
PROPE	RTY ADI	RESS: 13	0 NW 2	an Court, L	C, FL					
DIREC	TIONS 1	O PROPER	TY: <u>41</u>	North, TL M	Coore Road	, TI	R Jan Court,	1 <sup>st</sup>	lot	on left
				10			2-1		i.	30.5
BUILD	ING IN	FORMATION		[X] RESI	DENTIAL		[ ] COMMERC	IAL		
Unit No		of Lishment		No. of Bedrooms	-		mmercial/Inst ble 1, Chapte			l System Design FAC
1	SF R	esidenti	al	3	936		3BR L	Kr.	Sea	Lika
3					<del> </del>		<del></del>			
ı M		/Equipmen	t Drain	ns M Oth	ner (Specif	Y) _				0/10/0017
SIGNA	TURE:	100	<u> </u>	1				DAI	re: 1	0/19/2017

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

# LIMITED POWER OF ATTORNEY

I, Rusty Knowles, of Finest Mobile Home Set-up license # IH-1038219 herby
authorize Kimberly Koon of A&B Construction, to be my representative and act on
my behalf in all aspects of applying for an Moving Permit in Alachua, Baker,
Bradford, Clay, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Madison,
Suwannee, Taylor and Union County Florida.

This document is valid until rescinded by the qualifier.

Signed

| Carry | County | C



# COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160 (license holder name), licensed qualifier (company name), do certify that the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf. Signature of Authorized Person Printed Name of Person Authorized 2. 2. 3. 3. 4. 4. 5. 5. I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits. Date License Holders Signature (Notarized) NOTARY INFORMATION: COUNTY OF: Columbia STATE OF: Florida The above license holder, whose name is\_ personally appeared before me and is known by me or has produced identification (type of I.D.) tune on this 23 day of Oct.

